

South Carolina Department of Labor, Licensing and Regulation - Board of Dentistry

110 Centerview Drive, P.O. Box 11329, Columbia, South Carolina 29211-1329

(803) 896-4599; fax (803) 896-4719; www.llr.state.sc.us

Requirements and Instructions for License to Practice Dental Specialty

The South Carolina Board of Dentistry may issue a license to practice a dental specialty to an applicant that produces evidence satisfactory to the Board of meeting the following requirements:

1. You must have a valid South Carolina General Dentistry License.
2. You must:
 - (a) Successfully complete the South Carolina State Board Specialty Examination; **OR**
 - (b) If you are a diplomate of a national certifying board recognized by the American Dental Association, you may be granted a SC specialty license upon completion of an application and submission of fees.

The Application and Examination Process

1. The application fee of \$300.00 is required with your application. All application fees are non-refundable and non-transferable. The fee is to be paid by check or money order made payable to: LLR-Board of Dentistry.
2. The application must be fully completed with all requested information and documentation supplied. *The application form itself is a public document obtainable under the Freedom of Information Act.*
3. All documents and fees required to be submitted by you, or which must be requested from the appropriate institutions in the application process, must be mailed directly to:
**SC BOARD OF DENTISTRY
PO BOX 11329
COLUMBIA SC 29211-1329**
4. Applications are maintained in the Board office for a period of one (1) year. After such time the application is rendered void and the applicant must reapply and pay all required fees.
5. **EXAMINATION APPLICANTS:** State Board Specialty Examinations are administered twice a year (January and July) at the Board office, Synergy Business Park, Kingstree Building, 110 Centerview Drive, Columbia, South Carolina.
6. There is an application deadline of two months prior to the examination month date for an application to be made of November 1 and May 1.
7. Instructions for the exam and its content will be mailed to candidates about two months prior to the exam.
8. **DIPLOMATE APPLICANTS:** A notarized copy of your American Board Certificate must be submitted to the Board office. Upon request, you must appear before the Board at a time and place designated by the Board to answer any questions the Board may have.
9. **IMPORTANT: You must have a dental specialty license issued by the SC Board of Dentistry in your possession before you may lawfully announce specialization in a specialty area(s) of dentistry. You must limit your practice exclusively to the announced specialty area(s) of dental practice in SC.**
10. Upon issuance of a SC specialty license number, an original specialty wall certificate and re-registration wall certificate/wallet card will be mailed to you. You are required to display it in a conspicuous place in the office in which you practice.
11. We do not make calls to applicants on the status of their application or the results of the examination.
12. If you relocate during the time that your application is being processed, at the Board's website click on "Change Your Address" and follow the prompts.
13. **Exam results** are mailed to examination applicants 10 to 14 days after the examination date.

Checklist – Use to Complete your Application

NOTE: All submissions must be dated within six (6) months of receipt of the application.

- ☐ **Application:** Complete and sign the application in the presence of a notary.
- ☐ **Affidavit of Eligibility:** Complete and sign the application in the presence of a notary. Send with application.
- ☐ **Fee:** cashier's check or money order in the amount of \$300.00 made payable to: LLR – Board of Dentistry, must accompany the Application. Mail the application and fee to the Board office. Fees are non-refundable.
- ☐ **Education proof:** Request from the institution from which you completed your program a final dental transcript, showing specialty and date received; or certificate; or notarized copy of the certificate to be sent to the Board office.
- ☐ **Diplomates only:** You must submit a notarized copy of your American Board Certificate.
- ☐ **Personal History (Competency) Questions:** If any of your answers to the "personal history (competency) questions were in the affirmative, please submit a separate document to explain the situation. Note: You must answer "Yes," "No," or "N/A" to every question.



Letters of Recommendation: You must submit three (3) original **letters of recommendation** from licensed dentists who can attest to your good moral character. These letters must identify the individual as a licensed dentist, be submitted on the signator's letterhead, and bear the original signature of the author.

Rev. 08/29/14